

Student Handbook

Academic Year 2024 - 2025

This *Student Handbook* is intended to offer a framework of the intended professional student learning environment provided by the Department of Clinical Psychology faculty and staff. It is also provided to inform students of their rights as students and, equally important, their obligations and responsibilities. This *Student Handbook* does not constitute a contract, expressed or implied, between any applicant, student, faculty, or staff member and neither Mercer University, the College of Health Professions, nor the Department of Clinical Psychology. The University and College *Student Handbooks* supersede this *Student Handbook*. Updates and changes are made as necessary to the Student Handbook and become effective whenever the University, College, or Department administration so determine and will apply to both prospective students and those already enrolled. The Mercer University Department of Clinical Psychology reserves the right to make changes to policies and procedures without notice as necessitated by governing authorities or administrative needs.

Student Responsibility Form

Please complete at the PsyD Program orientation on August 16th, 2024.

Name:

Advisor:

I have received an electronic copy of the Mercer University Clinical Psychology *Student Handbook.* I understand that it is my responsibility to read and understand the requirements and procedures detailed in this *Student Handbook.* I also understand that I am responsible for following through on the program requirements and procedures.

I also acknowledge that it is my responsibility to read and understand the requirements and procedures detailed in the *Student Handbooks* at the College and University levels, which can be found here: <u>https://provost.mercer.edu/resources/handbooks/student-handbooks/</u>.

Signed: _____ Date: _____

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Dissertation Defense Scheduling Form
Oral Defense of the Dissertation

Program Information

Vision

Mercer University's Department of Clinical Psychology will be a nationally recognized leader in evidence-based training in integrated health care.

Mission

The mission of the Department of Clinical Psychology is to prepare psychologists as integrated health care practitioners who contribute to and apply scientific knowledge of human behavior to benefit individuals, systems, and society.

Core Values

We endorse and promote the core values of the College of Health Professions and the ethical principles of psychologists, including beneficence and nonmaleficence, fidelity and responsibility, integrity, justice, and respect for people's rights and dignity.

Profile of a Graduate

The Mercer University Clinical Psychology graduate will demonstrate:

- 1. Foundational knowledge of the core domains of the science of psychology, including affective, biological, cognitive, developmental, and social aspects of behavior, and history and systems of the discipline.
- 2. Understanding of psychological science, the research methodology involved in generating knowledge, and the scientific foundations of the practice of psychology.
- 3. Knowledge, relational skills, and technical skills involved in evidence-based assessment, diagnosis, intervention, and consultation.
- 4. The ability to impart knowledge and skills to trainees and to colleagues along with the ability to assess the acquisition of such knowledge and skills.
- 5. Understanding of research and clinical practice within a context of ethical and professional attitudes, values, and standards that include self-reflection, self-assessment, and self-care.
- 6. Understanding of dimensions of diversity that impact personal and professional interactions with diverse individuals, groups, and communities.
- 7. Understanding of the perspectives of other health care disciplines and an ability to collaborate effectively in interprofessional activities to promote individual, institutional, and/or systems level change.

Program Outcomes

The mission of Mercer's Program in Clinical Psychology is to prepare psychologists as integrated health care practitioners who contribute to and apply scientific knowledge of human behavior to benefit individuals, systems, and society.

To this end, we aim to produce:

- 1. Graduates with broad and general training in the science of psychology grounded in the biopsychosocial model. This aim reflects discipline-specific knowledge of history and systems of psychology, basic content areas in scientific psychology, research and quantitative methods, and advanced integrative knowledge in scientific psychology.
 - a. Competency: Substantial discipline-specific knowledge of affective, biological, cognitive, developmental, and social aspects of behavior
 - b. Competency: Substantial knowledge of history and systems of psychology
 - c. Competency: Substantial understanding and competence in advanced integrative knowledge of affective, biological, cognitive, developmental, and social aspects of behavior
 - d. Competency: Substantial understanding and competence in research methods
 - e. Competency: Substantial understanding and competence in quantitative methods
 - f. Competency: Substantial understanding and competence in psychometrics
- 2. Graduates who understand that the competent practice of psychology occurs in broad contexts that encompass diverse cultures, ethical/legal standards, and professional attitudes and values. This aim reflects profession-wide competencies.
 - a. Competency: Research Demonstrate the integration of science and practice in health service psychology
 - b. Competency: Ethical and legal standards Demonstrate ethical and legal standards in increasingly complex situations with a greater degree of independence across levels of training following the APA Ethical Principles of Psychologists and Code of Conduct, as well as relevant laws and regulations
 - c. Competency: Individual and cultural diversity Demonstrate sensitivity to human diversity and the ability to deliver high quality services to a diverse population
 - d. Competency: Professional values and attitudes Demonstrate professional values and attitudes in increasingly complex situations with a greater degree of independence across levels of training
 - e. Competency: Communication and interpersonal skills Demonstrate communication and interpersonal skills in increasingly complex situations with a greater degree of independence across levels of training
 - f. Competency: Assessment Demonstrate evidence-based assessment with a greater degree of independence across levels of training
 - g. Competency: Intervention Demonstrate evidence-based intervention with a greater degree of independence across levels of training
 - h. Competency: Supervision Demonstrate knowledge of supervision models and practices
 - i. Competency: Consultation and interprofessional/interdisciplinary skills Demonstrate knowledge and respect for the roles and perspectives of other professions

Our program was developed with careful attention to the Guidelines and Principles of Accreditation, now known as the Standards of Accreditation for Health Service Psychology. We anticipate that graduates will engage in a broad range of activities in health care environments that may include, but are not limited to, service delivery, consultation, program evaluation, and education and training of healthcare professionals. As such, graduates may contribute in traditional mental health settings as well as in a greater range of health care environments. The **practitioner-scholar** emphasis in our curriculum prepares students to apply research literature and contribute to the knowledge base and practice of the profession, consistent with the Doctor of Psychology (Psy.D.) degree.

Description of the Program

The Doctor of Psychology (Psy.D.) Program in Clinical Psychology prepares psychologists to become integrated health care leaders who reflect the Mercer traditions of liberal learning, professional knowledge, discovery, service, and community. The program of study is full-time and involves a minimum of 4 years (12 semesters) of coursework and 1 year of predoctoral clinical internship. Required courses involve 100 credit hours.

Core Faculty

Michelle M. Robbins, Department Chair; Clinical Professor Toi Curry, Clinical Assistant Professor Gail N. Kemp, Assistant Professor R. Davielle Lakind, Assistant Professor Mary Beth McCullough, Assistant Professor Mark A. Stillman, Clinical Associate Professor

Accreditation

Mercer University is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award baccalaureates, master's, and doctoral degrees.

The Doctor of Psychology (PsyD) Program at Mercer University is fully accredited by the American Psychological Association (APA) Commission on Accreditation. The program will have this accreditation status until its next site visit in 2032.

Questions related to the program's accreditation status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation American Psychological Association 750 1st Street, NE, Washington, DC 20002 Phone: (202) 336-5979 / E-mail: apaaccred@apa.org Web: www.apa.org/ed/accreditation

Policies and Procedures

General Information

The Department of Clinical Psychology has adopted the following policies. These policies describe what is expected of you as a student. It is your responsibility to familiarize yourself with the information presented in this *Student Handbook*, along with the other information available in the *College of Health Professions Student Handbook* and the *University Student Handbook* (https://provost.mercer.edu/handbooks). The *University Student Handbook* and *College of Health Professions Student Handbook* and the *Iniversity Student Handbook*.

The policies in this *Handbook* have evolved through a continual process of feedback, discussion, and exchange among students, faculty, and administrators. The present policies will be supported and adhered to by both students and faculty until changed or amended through appropriate channels.

Academic Policies and Procedures

Student Rights and Responsibilities

This code seeks to promote high standards of behavior and academic integrity by setting forth the responsibilities of students as members of the University community. Abiding by the code ensures a climate wherein all members of the University community can exercise their rights of membership.

Code of Conduct

Mercer University strives to be a *Community of Respect* where everyone is held in mutual high regard. Standards of conduct are based on the values of mutual respect:

Respect for Academic Integrity. We value a community that encourages an academic atmosphere. We believe that honesty is important to learning.

Respect for Other Persons. We value the worth of every individual in the community, and we respect the dignity of each member in the community. We take responsibility for the consideration of the rights of others.

Respect for the University Community. We value showing respect for the rights and property of others. We take responsibility to act to maintain University property.

Respect for Community Authority. We acknowledge and value our privileges and rights as members of the University community. We take responsibility for acting to uphold community standards.

Attendance

Attendance is required for all scheduled classes, labs, and clinical experiences. Because of the interactive and collaborative nature of professional education and rigor of doctoral training, regular class attendance is essential for successful learning. Repeated absences are violations of the Competency of Professional Values and Attitudes.

Students are expected to attend all classes/labs/seminars each semester. It is the student's responsibility to learn about material covered, announcements, schedule changes, or assignments announced during a missed class or late arrival. If you know in advance that you must miss class, please inform the instructor as soon as possible and clarify whether there are additional actions that you can or should take, given that you will not be present in class. Students should communicate in advance if they need to miss class or other accommodation for religious practices. In the case of unforeseen, emergency situations, please contact your instructor within 24 hours. After multiple excused absences, the faculty may assign an incomplete *or* offer an alternative opportunity for you to demonstrate mastery of the course material covered on the day(s) of your absence, in lieu of the penalties listed below. Otherwise, absences are remediated in the following manner.

- For any absence, the student must contact the instructor/practicum supervisor to determine what is needed to make up for the missed time.
- For 2 absences, the student's final grade is reduced by 12.5% and the student is responsible for contacting the instructor/supervisor to determine what is needed to make up for the missed time. The student is required to meet with his/her advisor or remediation committee to determine how to remediate difficulties.
- For 3 absences, the student's final grade for the course is reduced by 18.75%. For practicum, the grade is reduced to a "U".
- For 4 absences, the student is automatically awarded a grade of F, which results in dismissal from the Program.

Tardiness

Arriving on time and being prepared for class are important professional values that align with the APA competencies. Determining tardiness is at the discretion of the instructor and will be defined in the syllabus. Repeated tardiness could lead to a referral for a Student Professional Development and Support (SPDS) Committee. Grade penalties or utilizing timely course attendance as part of the grade is at the instructor's discretion and will be outlined in the syllabus. If a student misses 50% or more of a given class, then it is considered an absence.

Professional Conduct

In addition to the usual academic challenges, doctoral students must demonstrate personal maturity, emotional stability, social competence, ethical standards, and demeanor befitting a psychologist. These dimensions are assessed formally though departmental review of graduate students. Clinical students are in a professional training program, and those who do not behave in a professional manner throughout their training may be dismissed from the program. Examples of unprofessional behavior include: frequently arriving late for classes, supervision, clinical appointments with clients, or other professional meetings; excessive defensiveness with

supervisors or instructors; rude, disrespectful behavior with faculty, classmates, or clients; and intoxication on campus. Evidence of unethical behavior in research, clinical work, or classes (e.g., cheating on exams, plagiarism) is grounds for Program dismissal.

Personal Problems

As stated in APA's "Ethical Principals of Psychologists and Code of Conduct":

"Psychologists refrain from initiating an activity when they know, or should know, that there is a substantial likelihood that their personal problems will prevent them from performing their work-related activities in a competent manner. When Psychologists become aware of personal problems that may interfere with their performing work-related duties adequately, they take appropriate measures, such as obtaining professional consultation or assistance, and determine whether they should limit, suspend, or terminate their work-related duties."

The Department takes a similar position with regard to psychologists-in-training. Examples of personal problems include, but are not limited to, substance abuse, maladaptive social behaviors, untreated mental or physical health issues, and dishonesty in dealing with peers, supervisors, clients, or others.

Standards of Performance/Termination

Each candidate for a Doctor of Psychology degree must secure credit, in the approved courses of the curriculum. In securing this credit, each candidate must have a grade point average (GPA) of at least 3.00. All Clinical Psychology courses require a minimum grade of "B" or "S" for Satisfactory. A student may repeat a maximum of two courses to improve a letter grade of C or C+ to B or higher or of U to S. Any course grade below C or a grade of U or "Unsatisfactory" is considered failing and will not count toward degree requirements. Students who earn a final grade of two classes of C or below (or a U) will be dismissed from the Program. Students earning a single grade of F in an academic course will be automatically dismissed from the Program.

Length of Degree and Residency

The time-to-degree for the Doctor of Psychology degree is at least five years from Program entry and must be completed within seven years. Leaves of absence count toward the seven-year time frame and must be approved by the Student Progress and Advancement Committee. The time requirements begin when a student formally enrolls in his or her first graduate course. Students in the Program are required to spend at least four years in residence for coursework and clinical practica prior to attending a one-year internship. Program residency allows students to develop clinical skills and scholarship, benefit from peer socialization and support, and have access to core faculty and practicum supervisors who conduct ongoing assessment of student competencies. During Year 2 of coursework, students begin their first practicum placement. They complete two additional years of clinical practica in Year 3 and Year 4. Students are required to have completed at least two years (six semesters) of practica before being allowed to apply to the internship Match.

Advisement

Students are assigned to faculty members throughout the Department who serve as their advisors when they begin the Program. At the beginning of their second year, students complete a form rank ordering their advisor choices from among the core faculty. The Program will attempt to match students with their first or second choice, depending on faculty workload.

- Students will meet with their faculty advisors after fall and summer semesters to receive departmental feedback on their progression in the Program.
- Students will meet with their faculty advisors as needed for academic counseling or personal and professional discussions.

Leave of Absence Policy

The *University Student Handbook* describes procedures for administrative or medical withdrawals on page 38 (<u>https://provost.mercer.edu/handbooks</u>).

Admission to Doctoral Candidacy

A student is admitted to doctoral candidacy after: (1) meeting expectations on assessments of discipline-specific knowledge (DSK) of Research Methods, Statistical Methods, and Psychometrics; Affective, Biological, Cognitive, Developmental, and Social Psychology; and Advanced Integrative Knowledge; and (2) successful completion of one year (three semesters) of practicum training.

Clinical Internship

Students complete one full year (or its equivalent) of a clinical internship approved by the Director of Clinical Training (DCT) for the Mercer Clinical Psychology Program. The clinical internship consists of no fewer than 2000 clock hours. Students are expected to complete training at APA-accredited internship training programs, and requests to apply to unaccredited programs are considered by the DCT on an individual basis. These programs must hold APPIC membership, as well as following APPIC requirements for internship

(<u>https://www.appic.org/Joining-APPIC/Members/Internship-Membership-Criteria</u>) and the State of Georgia licensing requirements. If students are seeking an exception to the requirement for internship programs to be APA-accredited, they are responsible for providing the following information to the DCT, who will evaluate the site for its adequacy in meeting the required standards:

- a. The nature and appropriateness of the training activities;
- b. Frequency and quality of supervision;
- c. Credentials of the supervisors;
- d. How the internship evaluates student performance;
- e. How interns demonstrate competency at the appropriate level;
- f. Documentation of the evaluation of its students in its student files.

Deadlines for Internship Application (all dates are before that year's internship application cycle):

June 1 - Oral defense of dissertation proposal completed

July 1 - Dissertation proposal revisions completed and approved

September 1 – Successful completion of all components of the Clinical Competency Portfolio (CCP)

Application for Graduation

Students who expect to qualify for graduation must file applications for graduation with the Registrar's Office in the semester prior to completing degree requirements.

Degree Requirements

- 1. Completion of the Doctor of Psychology curriculum (totaling 92 semester hours for cohorts entering before 2019; 100 for cohorts entering in Fall of 2019 and after) with grades of at least "B" or "S" in each course.
- 2. Successful demonstration of professional performance standards throughout the student's career in the Clinical Psychology program.
- 3. Successful completion of practica, content area examinations, portfolio of clinical competencies, internship, and dissertation.
- 4. Recommendation by the faculty of the Clinical Psychology program with final verification by the Department Chair.
- 5. Payment of all financial obligations to the University.

Final Academic Check & Recommendation for Graduation

The Office of the Registrar checks academic records and clears for graduation those students who have met all degree requirements. The Registrar's office notifies students of their status in that regard and grants clearance for graduation.

Commencement Participation & Awarding of Diplomas

Students who have met all degree requirements are eligible to participate in commencement. If students are on an internship that ends during the summer semester after commencement, they are eligible to walk if: 1) all other requirements are completed and 2) the internship director indicates that the student is likely to finish the internship successfully. Diplomas are not distributed at commencement. Degree conferral will occur after the internship ends. Graduates are notified of the availability of diplomas for pick up at the Office of the Registrar.

Deadlines for Participation in May Graduation Ceremony:

December 15 (of internship year) -- Dissertation defense completed and passed February 1 (of internship year) -- All revisions of dissertation completed March 1 (of internship year) -- Final bound copy of dissertation due to the Department In order to participate in the May ceremony, only internship credit hours can be taken in the summer semester.

Student Progress

Scaling on milestone assessments of discipline-specific knowledge and profession-wide competencies is as follows:

Scale	Minimum Levels of Achievement
1 In need of additional instruction	Discipline-Specific Knowledge Earning 80% or above on assessment in applicable course; should be at 4 or above on evaluation rubric after taking the applicable course
4. Advanced knowledge and	Profession-Wide Competencies
competencies 5. Functioning as entry-level professional	1^{st} year students - should be at 2 at the end of their second semester. 2^{nd} and 3^{rd} year students - should be between 3 and 4. 4^{th} year students - required to be 4 or above.

Biannual Review

After each Fall and Spring semesters, the Student Progress and Advancement Committee (SPAC) reviews each student's grades, practicum evaluations, DSK assessment results, progress on the clinical competency portfolio, research mentor reports, and academic advisor reports. Students are assessed after both fall and spring semesters, with formal ratings using the Student Progression Rubric provided after the spring meeting. Academic advisors review the evaluations with their students. Students who are not meeting developmentally appropriate requirements are referred to an ad hoc committee composed of core faculty to develop a remediation plan for student improvement (see Student Professional Development and Support section below).

Discipline-Specific Knowledge (DSK) Assessments

Students complete assessments in applicable courses for discipline-specific content areas in affective, biological, cognitive, developmental, and social aspects of behavior; advanced integrative knowledge of affective and cognitive psychology; history and systems of psychology; research methods; statistical methods, and psychometrics. They must earn at least 80% on the assessments to meet expectations for DSKs. Students who demonstrate discipline-specific knowledge on course assessments receive scores of 4 or above on those DSK areas on student annual evaluations.

Clinical Competency Portfolio

Students demonstrate their clinical competencies via a Clinical Competencies Portfolio (CCP), a comprehensive assessment designed to evaluate doctoral students' competencies throughout their clinical training in the Program. Competencies are evaluated via assessment and intervention write-ups, case presentation, practicum evaluations, and self-reflection. More information on the CCP can be found in the Clinical Competency Portfolio Guidelines section of the *Handbook*.

Dissertation

Students are provided verbal feedback on their dissertation defense immediately following the meeting. The dissertation covers the profession-wide competency of research. Students must receive scores of 4 or above on the research profession-wide competency at the time of the proposal defense and a 5 at the time of the dissertation defense. The scoring rubric is in the appendix. More information on the dissertation can be found in the dissertation section of the *Handbook*.

Student Professional Development & Support (SPDS)

Students are sometimes referred to an ad hoc support committee of two faculty members. This Student Professional Development and Support (SPDS) committee's goal is to assess and guide students in improving their academic performance and developing their professional competencies by creating a remediation plan. The committee may hold hearings on student issues specific to professional or academic requirements and recommend actions that may include (but are not limited to) student advisement, remediation, probation, or dismissal when warranted. If remediation actions are not satisfied by the student or the student has a second referral, the committee may impose probationary conditions with explicit requirements and a timeline for removal from probation. After a second SPDS committee referral, another infraction that would typically be referred to a third SPDS will instead result in dismissal from the program. The SPDS committee will determine any consequences that will result from student noncompliance with probation requirements. If remedial actions are not sufficiently achieved by the student, or if remediation is not appropriate in the event of a severe student conduct violation, the committee may recommend that a student be dismissed from the program.

Other examples of issues for which student may be referred to an SPDS committee include but are not limited to:

- The student receives a grade below B.
- The student repeatedly has been identified as having significant difficulties with professional writing skills.
- The student fails to satisfactorily progress through the Program or has fallen more than one year behind in their approved program of study.
- The student is dismissed by a practicum or internship site.
- The student receives an *Incomplete* in a practicum seminar.
- The student fails to meet expectations on a DSK assessment.
- The student presents significant concerns in professional development or conduct including:
 - Unethical conduct.
 - Serious violations of program policy.
 - \circ Problems with fitness to practice or engagement in training.
 - Unprofessional demeanor or behavior.
 - o Serious difficulties with professional judgment.

The chair of the SPDS committee documents specific issues and concerns that were discussed in the meeting, the student's plans to address such issues, and the committee's recommendations for additional steps that can be taken by the student to promote student success, remediation, and other actions. A copy of this written summary is forwarded to the student, the student's academic advisor, the Chair of the Student Progress and Advancement Committee, and the Department Chair and is maintained in the student's academic file.

Record Keeping

The Program keeps paper copies of the students' files for seven years. After that time, student files are scanned and kept electronically. It is the responsibility of the student to keep course syllabi for licensure purposes. It is recommended that students use a service, such as the Association of State and Provincial Boards' credential bank service (http://www.asppb.net/?page=TheBank).

Admission Requirements

Students are admitted for a program of study that begins in the fall semester. The deadline for receipt of applications for fall enrollment is March 1. Qualified applicants are accepted on a rolling admissions basis or placed on a waiting list until all positions have been filled. The Clinical Psychology Program participates in the Centralized Application Service, known as PSYCAS. Admission requirements must also include:

- Completion of an undergraduate (Bachelor's) degree from a regionally-accredited college or university in the United States.
- Preferred undergraduate Grade Point Average (GPA) of 3.00 on a 4.00 scale for the last two years of college and for psychology courses.
- An undergraduate major in psychology (preferred) or a minimum of 12 semester hours taken of psychology coursework.
- The prerequisites for Mercer's PsyD Program are:
 - Introductory psychology,
 - Abnormal psychology,
 - o Developmental psychology, and
 - o Statistics or research methods
- Completion of all prerequisites prior to matriculation with required GPA of 3.00. If you have taken a prerequisite more than once, we will use your best attempt in calculating your prerequisite GPA.
- Graduate Record Examination (GRE) general test scores. A competitive combined Verbal plus Quantitative GRE score is 299. Completion of the GRE Psychology subject area test is recommended, particularly for non-psychology majors. Applicants are encouraged to submit official GRE scores directly through PSYCAS using our program code 2019.
- A personal statement describing educational and career goals in psychology.
- Arrangements for three letters of reference, including at least one from a psychology instructor

- Qualified applicants with complete files and who meet or exceed the admissions criteria listed above may be invited to campus for a personal interview.
- International students or domestic students with credentials from institutions outside the United States are required to have those credentials evaluated by a professional evaluation service. Transcripts from colleges and universities outside the U.S. must be evaluated by World Education Services (WES) and submitted to PSYCAS. Please see www.wes.org/psycas for instructions. Additionally, applicants whose native language is not English must also demonstrate satisfactory proficiency in English Language as measured by the Test of English as a Foreign Language (TOEFL). Until these documents have been submitted, an application for admission cannot be considered.

Transfer Credit

Course credit for as many as nine (9) semester hours of prior graduate psychology courses may be awarded. Transfer credits will be awarded when the course being evaluated meets all the following criteria:

- 1. All transfer credit must be awarded during the student's first academic year in the doctoral program.
- 2. Courses that meet the criteria defined by the APA Standards of Accreditation as disciplinespecific knowledge will be considered for transfer. Specifically, these are: biological bases of behavior, cognitive-affective bases of behavior, social psychology and social neuroscience, history and systems, lifespan developmental psychology, research methods, psychometrics, and statistical methods. Courses that meet the criteria defined by the APA Standards of Accreditation as profession wide competencies will only be considered for transfer from other doctoral clinical psychology programs in rare cases.
- 3. It was completed no longer than five years before the student's first enrollment in the program.
- 4. A grade of B or higher was received. A grade of P (pass) or CR (credit) or other such grades cannot be accepted as equivalent.
- 5. The course is not offered solely in an online format.

Procedure for Transfer Credit The student must provide the Student Progress and Advancement Committee (SPAC) Chair using the transfer credit form and attaching the required documentation (syllabus and transcript). The SPAC will consider the quality/rigor, currency, standardization, and fairness of the method of establishing the knowledge of courses being evaluated. The committee may require the student to provide further documentation and supporting material, such as class notes and to meet with them. The resulting evaluations are reviewed by the Department Chair who makes the final determination.

Background Checks and Drug Screenings

Drug and background checks are required for all Clinical Psychology students as part of their participation in service learning, clinical experiences, and clinical internships. Students will incur charges associated with the background and drug check(s). Once admitted to the program, the students are required to have a drug screen and background check prior to New Student

Orientation. If either test is deemed positive by the verification company, the matter will be brought before the Program's Admissions Committee for review. The student's acceptance could possibly be reversed and the student not allowed to matriculate based on the results of these evaluations. Neither the University nor the Clinical Psychology Program will be held liable for a student's failure to graduate or obtain a state license due to a positive criminal background check and/or failed drug screen. Repeat criminal background checks and drug screens may be required as determined by the Clinical Psychology Program or clinical site.

Confidentiality of Clinical Records

All clinical records and patient materials are considered privileged and confidential. As part of a student's training, student trainees provide clinical services to patients at Mercer University and at other off-site practicum placements. Each practicum placement site, including Mercer University sites, maintains Policies and Procedures governing the confidentiality of client records. Provisions relating to patient confidentiality are specifically incorporated into this Policy by reference.

Confidentiality of Education Records

Student Rights Pertaining to Education Records

The Family Educational Rights and Privacy Act (FERPA) affords students at Mercer University certain rights with respect to their education records. These rights include:

- 1. The right to inspect and review a student's education records within 45 days of the day the Office of the Registrar receives a request for access. The student should submit to the Registrar a written request that identifies the record(s) the student wishes to inspect. The Registrar will make arrangements for access and notify the student of the time and place where the records may be inspected. If the registrar does not maintain the records, the student shall be advised of the correct official at the University to whom the request should be addressed.
- 2. The right to request the amendment of the student's education records that the student believes is inaccurate. The student should write the Registrar, clearly identify the part of the record he/she wants changed, and specify why it is inaccurate. If the University decides not to amend the record as requested by the student, the Registrar or other appropriate official, if the record is maintained by another office, will notify the student of the decision and advise the student of his or her right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the student when notified of the right to a hearing.
- 3. The right to consent to disclosures of personally identifiable information contained in the student's education records, except to the extent that FERPA authorizes disclosure without consent. One exception, which permits disclosure without consent, is disclosure to school officials with legitimate educational interests. A "school official" is a person employed by the University in an administrative, supervisory, academic, research, or support staff

position (including law enforcement personnel and health staff); a person serving on the Board of Trustees; or a student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing his or her tasks.

- 4. The right of a currently enrolled student to request that his/her "directory information" not be released by Mercer University. The University at its discretion and without the written consent of the student may release "directory information" which includes the following items; student name, address, telephone number, date and place of birth, academic program, dates of attendance, degrees and honors received, most recent previous institution attended and participation in officially recognized activities and sports. A student request for nondisclosure of the above items must be filed with the Office of Registrar.
- 5. The right to file a complaint with the US Department of Education concerning alleged failures by Mercer University to comply with the requirements of FERPA. The name and address of the office that administers FERPA are: Family Policy Compliance Office, US Department of Education, 400 Maryland Avenue, SW Washington, DC 20202-4605.

Ethical Principles and Code of Conduct

Students are required to learn and comply with the American Psychological Association's Ethical Principles of Psychologists and Code of Conduct, which is specifically incorporated into this Policy by reference. The Ethic Principles and Code may be viewed at http://www.apa.org/ethics/code/index.aspx. During coursework, practicum, and internship training, faculty and supervisors will conduct evaluations of the student, which include an assessment of the student's ethical behavior. Further, the *Professional Values* and the *Professional Issues & Ethics* courses are devoted to student acquisition and integration of competencies in ethics and professionalism into the professional practice of psychology.

Students also are made aware of licensing requirements for Psychologists in Georgia and the Ethical Principles and Code of Conduct of the Georgia State Board of Examiners of Psychologists, which is specifically incorporated into this Policy by reference. The state licensure rules and requirements for psychologists may be viewed online at: https://sos.ga.gov/georgia-state-board-examiners-psychologists.

Financial Assistance

We attempt to provide financial assistance to our students through the Federal Work Study program. Applications for positions are sent to current and incoming students in the summer. Students must complete a FAFSA to be eligible. Other information about financial aid can be found here: <u>https://financialaid.mercer.edu/</u>.

Health and Immunizations

Students will complete the Student Record of Immunizations and Health Screening prior to matriculation in the program. If any series of immunizations are in progress (i.e., hepatitis B series), timely completion is required, with notification to the Student Health Center on the Atlanta campus (https://campushealth.mercer.edu/) and the Department of Clinical Psychology Academic Support Specialist. Annual tuberculosis (TB) screening is required to continue in the practicum placements. Students are responsible to keep track of due dates for annual physical examinations, future immunization requirements (i.e., tetanus boosters), and TB screenings. Appropriate planning for appointment times is required by the student to meet these requirements.

Any concerns related to safety of the immunizations or screenings regarding specific health issues (medical conditions, pregnancy, etc.) should be discussed with your personal physician. Failure to meet requirements due to these concerns may prohibit involvement in practicum placements, thus stopping progression within the program. These situations will be handled on a case-by-case basis by the Department Chair, the Director of Clinical Training, and the Program's Student Progress and Advancement Committee, in consultation with the College's Associate Dean.

Influenza Vaccination

All students in the Clinical Psychology Program receive an annual influenza vaccination during each fall semester. The CDC emphasizes to clinicians the urgency of vaccination for people who care for people at higher risk for influenza-related complications. The requirement is consistent with the CDC recommendation, as during clinical experiences, clinical internships, and service learning students are in contact with higher risk populations. Further, an increasing number of clinic sites require students to have this vaccination before starting the practicum. Students who are allergic to the vaccination will need to have medical documentation of this and may be required to follow other procedures to prevent transmission.

Health Insurance

All students enrolled at Mercer University are automatically enrolled in a student health insurance program each semester, and the premium is billed to your account. Please check with the Bursar's Office for the most current information: https://bursar.mercer.edu/studentinsurance/

Grievance Policies and Procedures

The Department follows the grievance policy indicated in the *University Student Handbook*. The most up-to-date and complete version can be found in the *University Student Handbook* at https://provost.mercer.edu/resources/handbooks/_

Academic Grievances and Appeals Policy

Policy: Students have the right to bring grievances against a faculty member or an administrator and to appeal decisions concerning academic matters. A "grievance" is typically a complaint relating to some allegedly improper action or behavior. An "appeal" is typically a request for review of a routine judgment or decision. Such matters may include, but are not limited to, failure to abide by requirements described in the course syllabus; arbitrary awarding of grades; and discrimination based on race, color, national origin, disability, veteran status, sex, sexual orientation, genetic information, age, or religion (except in limited circumstances where religious preference is both permitted by law and deemed appropriate as a matter of University policy). Time Frame: For grievances and appeals of any kind, students are required to initiate them with the appropriate faculty member no later than thirty (30) days from the completion of the term in which the course was offered. Grievances or appeals received after this period will not be honored.

Informal Resolution Procedure: Student grievance and appeal procedures encourage each student to handle complaints as close to the source as possible. If a student has a complaint against a faculty member, the student should first attempt to resolve the issue by an informal meeting with the faculty member involved. If this is not satisfactory, or if the student believes that they cannot discuss the complaint with the instructor, the student may follow the Formal Resolution Procedure.

For the Formal Resolution Procedure, the following protocol should be followed:

- 1. The student should meet with the appropriate Department Chair or after submitting to this person a formal written account of the grievance or appeal. This narrative must be submitted no later than thirty (30) days from the date on which the student was formally notified of the instructor's decision.
- 2. If the grievance or appeal is not satisfactorily resolved by the Department Chair, the student should meet with the Associate Dean after submitting to the Associate Dean a formal written account. This narrative must be submitted no later than thirty (30) days from the date on which the student was formally notified of the Department Chair's decision.
- 3. If the grievance or appeal is not satisfactorily resolved by the Associate Dean, the student should meet with the Provost after submitting to the Provost a formal written account of the grievance or appeal. This narrative must be submitted no later than thirty (30) days from the date on which the student was formally notified of the Associate Dean's decision.

If the student has a grievance or appeal involving a dean, he or she should schedule an appointment with that dean in an attempt to resolve the matter. If the matter is not resolved or if the student believes that he or she cannot discuss the issue with that dean, the student may address the grievance or appeal to the Provost. In all academic grievance and appeal procedures, the decision of the Provost is final.

Outside Work Activities

As this Program is full-time, any outside activities (including work) must not conflict with Program requirements and responsibilities. The following procedures apply to all clinical students who wish to do paid or non-paid clinical activities, outside of a program approved practicum or research setting. The Director of Clinical Training will review students' requests with input from the faculty. Please allow at least 2 weeks for the approval process. Procedures for Applying for Outside Clinical Activities:

I. Prepare a letter for the Director of Clinical Training describing:

- the job (i.e., type of activity)
- the # hours per week
- the name, phone number, and professional background of the supervisor (describe if the person is a licensed professional)
- the amount and type of supervision provided
- whether or not the supervisor or "site" has professional liability insurance to cover your activities, and the amount of the insurance
- whether or not it is a "paid" or "volunteer" position

II. The letter should acknowledge that you understand that:

- under APA ethical guidelines and the GA state licensing guidelines, you may not represent yourself as a psychologist or as a graduate student in our program/department
- the hours accumulated in an outside clinical setting cannot be counted toward your clinical hours for internship
- the Mercer University liability insurance policy does not cover your activities in case of malpractice, as the activities are not a part of your training program

III. Have the letter co-signed by your advisor

Non-Discrimination Policy

The Department of Clinical Psychology endorses the University's and the College of Health Professions' policy on non-discrimination, which can be found here: https://policies.mercer.edu/www/mu-policies/upload/NonDiscriminationPolicy.pdf.

The core of the policy statement reads as follows:

Mercer University ("the University") is committed to maintaining a fair and respectful environment for living, work and study. To that end, and in accordance with federal, state and local law and the University's Equal Employment Opportunity and Affirmative Action Policy, the University prohibits harassment of or discrimination against any person because of race, color, national or ethnic origin, disability, marital status, veteran status, sex (including pregnancy, child birth or a medical condition related to pregnancy or childbirth), sexual orientation, gender identity, gender expression, genetic information, age, or religion (except in limited circumstances where religious preference is permitted by law), or any other protected status or characteristic as defined by law. Incidents of unlawful harassment and discrimination will be met with appropriate disciplinary action, up to and including dismissal or expulsion from the University. The University will follow the Sexual Misconduct Policy (Title IX Policy) found at https://titleix.mercer.edu/upload/SMRVPolicy.pdf. All allegations of discrimination and harassment not covered by the University's Sexual Misconduct Policy, based on the protected categories outlined above, will be handled pursuant to this policy.

Plagiarism and Cheating

Mercer University strives to be a community of respect that includes respect for academic integrity. Students operate under an honor system and will exhibit the values of honesty, trustworthiness, and fairness regarding all academic matters. Students, faculty, and staff are expected to report any violations in the forms of, but not limited to, cheating, plagiarism, and academic dishonesty to the honor council appropriate for their campus and program. Procedures related to Honor Systems and Academic Integrity are outlined in the specific handbooks for each campus and can be found on the Provost website at

https://provost.mercer.edu/resources/handbooks/.

Program Endorsed Student Organizations and Activities

Student Membership - APA, SEPA, and GPA

The American Psychological Association (APA) is the professional organization for psychologists in the United States. The Association's divisions are active at the state, regional, and local level, providing conferences for professional interaction and training and public advocacy on psychological issues, as well as opportunities for referral. Students are encouraged to apply for membership in APA, the Southeastern Psychological Association (SEPA), and the Georgia Psychological Association (GPA). Included in these memberships are access to conference information, funding opportunities, and national, regional, and local information. Web access to these organizations may be found at <u>http://www.apa.org/apags/about/index.aspx</u>, at http://www.apasychology.org.

Fund-Raising Projects

Fund raising activities must be pre-approved by the College of Health Professions Office of Admissions and Student Affairs. Forms are available in the Office and online.

Services for Students with Disabilities

Students requiring accommodations for a disability should inform the instructor at the close of the first class meeting or as soon as possible. The instructor will refer them to the Office of Access and Accommodations to document the disability, determine eligibility for accommodations under the ADAAA/Section 504, and to request a Faculty Accommodation Form. Disability accommodations or status will not be indicated on academic transcripts. In order to receive accommodations in a class, students with sensory, learning, psychological, physical, or medical disabilities must provide their instructor with a Faculty Accommodation Form documenting their accommodations. Students must share their accommodations with each professor each semester. Students having a history of a disability, perceived as having a disability, or having a current disability who do not wish to use academic accommodations. For further information, please contact the Mercer University Office of Access and Accommodations at this website: https://access.mercer.edu/.

Social Media

Mercer University guidelines regarding social media and university policy may be found at <u>https://www.mercer.edu/wp-content/uploads/2019/04/Social-Media-Guidelines.pdf</u> and in the College of Health Professions Handbook found at

https://chp.mercer.edu/studentresources/student-handbooks/. In addition, the Clinical Psychology Program has formulated the following guidelines adopted from the Council of University Directors of Clinical Psychology (CUDCP):

Overview

Electronic media may be accessed or used in ways that may reflect poorly on students, training programs, academic institutions, and the psychology profession. As a highly visible practice, practitioners and practitioners-in-training must recognize the potential impact of this information on their professional communication and image. In this regard, the Council of University Directors of Clinical Psychology (CUDCP) has noted the following to its member programs, including Mercer's Program in Clinical Psychology.

- Some internship programs conduct web searches on applicants' names before inviting applicants for interviews and before deciding to rank applicants in the match.
- Clients may conduct web-based searches on trainees' names and find information about therapists (and may decline to come to clinics based on what they find).
- Employers may conduct online searches of potential employees prior to interviews/offers.
- Legal authorities are looking at websites for evidence of illegal activities. Some prima facie evidence may be gained from websites such as photographs, but text may also alert authorities to investigate further.
- A student's postings on a variety of list-serves (psychology or otherwise) might reflect poorly on the student and the student's program.
- Although signature lines are ways of indicating your uniqueness and philosophy, one is not in control of where the emails will end up and might affect how others view you as a professional. Quotations on personal philosophy, religious beliefs, and political attitudes might cause unanticipated adverse reactions from other people.
- Greetings on answering machines and voicemail messages that might be entertaining to peers, express individuality, and indicate humor may not portray a positive professional demeanor. Phones used for professional purposes (research, teaching, or clinical activities), should contain greetings that are professional in demeanor and content.

Rules and Guidelines for Social Networking

Questions about specific situations and/or rules should be addressed to the Department Chair or the Director of Clinical Training. However, students generally are advised to do the following:

- Block clients, students, research participants, and other professional contacts from seeing email status messages and personal photographs.
- Conduct periodic Google searches on yourself to find out what information about you can be accessed on the internet.

- Remove nonacademic or nonprofessional electronic signatures from emails sent to patients, research participants, and other professional contacts. Use the Mercer University email address to contact clients and others for university-related business.
- Set website privacy settings to highest privacy settings available (i.e., "Friends only") on social networking websites. Monitor privacy settings periodically.
- Ensure that voicemail greetings accessed by professional contacts are professional in tone and content.
- Never become a "friend" of a patient or research participant online, thereby enabling them to access personal information.

Student Professionalism Policy

The Clinical Psychology Program at Mercer University adheres to the *APA Ethical Principles and Code of Conduct of Psychologists*. These principles and code exist to promote integrity, competency, and responsibility in the field of psychology. Students enrolled in the Program are regarded as "psychologists-in-training." As such, students are expected to adhere to these principles and code as the primary requirements for professional behavior in the classroom, in clinical settings, and in the community. Students will be called upon from the start of the program to exercise high ethical standards, including a high standard of confidentiality and respect for patient information.

The dynamic interplay between the standards of *academic honesty, clinical competence,* and *interpersonal integrity* shapes the ethical nature of the student training experience. Given the clinical nature of the programs, it is the ethical obligation of faculty to monitor student progress in academic, research, and clinical performance, as well as the level of professionalism directed toward self, colleagues, peers, faculty, and community. Any concerns regarding a student in any one of these areas will result in faculty addressing the concern with the individual student and other faculty members.

The *Graduate Honor System of Mercer University* also sets forth the guiding requirements for academic honor for all graduate students of the University. The *Graduate Honor System of Mercer University* is administered by the Graduate Honor Council. The most recent version of this Code can be located at https://provost.mercer.edu/office-of-the-provost/honor-system/.

Graduate Assistantship Guidelines

The award of a graduate, research, or teaching assistantship carries with it high expectations of helpfulness, responsibility, professionalism, and ethical standards.

- Students participating in an assistantship will complete a contract with their supervisor to specify mutual expectations regarding duties and hours
- Weekly hours typically consist of 8 hours per week through end of semester exams
- Students accurately submit their hours worked and tasks completed in Workday for approval
- Assistantship duties are to be considered a priority over other nonacademic work

- Assistants are expected to be available at the convenience of the assigned supervisors and are expected to notify their supervisor as soon as possible if illness or other conflicts interfere with normal work expectancies in any way
- Assistantships may be terminated at any time due to such things as poor academic or work performance, general unavailability of the student to complete assistantship hours in a satisfactory manner, violations of policy, and unethical or inappropriate behavior

Student Travel to Research Conferences

Students are eligible to be reimbursed up to \$600 for travel to research conferences if they are the primary presenter (first author), based on availability of funds and pending Provost and Dean approval.

To be eligible for reimbursement, students must adhere to the following:

Prior to application

- 1. Consult with your faculty advisor or research mentor about your submission plans
- 2. Email the Program's Academic Support Specialist and Department Chair your intention to apply to a conference

Prior to the event

- 1. As soon as you are accepted to present, complete the <u>University Student Travel Request</u> <u>form</u>, including a copy of your acceptance and documentation of the cost to attend the conference (e.g., registration fee, airfare, hotel, etc.)
- 2. Have the form signed by your advisor or research mentor and submit the signed form to the Program's Academic Support Specialist, who will obtain the Department Chair's signature.
- 3. The Department Chair will sign it, request the Dean's signature, and send it to the Provost. The request form needs to be delivered to the Provost at least 30 days before the event, so make sure there is enough time to get the required signatures.
- 4. Make sure you receive documentation of signed prior approval from the Dean/Provost prior to scheduling your travel

Following the event

1. Within 10 days of returning, submit the with original receipts, the approved travel request form, and proof of conference presentation in Workday to obtain your reimbursement.

Use of Student Information

As part of the ongoing assessment, evaluation, and review of the curriculum, student information is used for evaluation and feedback to improve the educational program and to document student progress. Course evaluations, faculty evaluations, student progress assessment and feedback, surveys, videotaped encounters, and group work are included in this process. Data are primarily reported in the aggregate, and individual identification is protected. There will be some instances when videotape review will be used to teach clinical skills. When data are used for documenting and publishing about the curriculum and student outcomes, appropriate institutional review will occur and aggregate data used. If the use of identifying information is needed, appropriate student consent will be obtained.

Course Schedule & Enrollment

The Mercer University Clinical Psychology degree program spans a minimum of 12 consecutive semesters. Following satisfactory completion of all coursework except the dissertation, students enroll in a one-year internship or the equivalent. Full-time enrollment follows a recommended program sequence for each matriculating class and is defined as a minimum of 6 credit hours per term. Matriculating students are expected to maintain full-time enrollment during the academic year, consisting of fall, spring, and summer semesters.

Doctor of Psychology Curriculum

Biological, Methodological, & General Psychology Requirements (22 hours)

- CPSY 701 Psychometric Theory & Assessment (3)
- CPSY 702 Lifespan Developmental Psychology (3)
- CPSY 703 Biological Bases of Behavior (3)
- CPSY 710 Cognition & Affective Processes (3)
- CPSY 711 Social Psychology and Social Neuroscience (3)
- CPSY 712 Research Design (3)
- CPSY 714 Statistical Methods (3)
- CPSY 812 Seminar in History & Systems (1)

Ethics, Professional Values, & Cultural Diversity Requirements (7)

- CSPY 716 Professional Values (1)
- CPSY 717 Ethics & Professional Issues (3)
- CPSY 718 Individual & Cultural Diversity (3)

Assessment (21)

- CPSY 708 Psychopharmacology (3)
- CPSY 721 Psychopathology (4)
- CPSY 731 Personality Assessment (4)
- CPSY 732 Cognitive Assessment (4)
- CPSY 833 Neuropsychological Assessment (3)
- CPSY 865 Child Psychopathology (3)

Intervention (14)

- CPSY 733 Clinical Interviewing (4)
- CPSY 743 Evidence-based Assessment & Therapy I (4)
- CPSY 745 Evidence-based Assessment & Therapy II (3)
- CPSY 874 Child & Family Behavior Therapy (3)

Consultation, Supervision, and Health Psychology (14)

CPSY 704 Integrated Primary Healthcare and Consultation (3)

CPSY 726	Health Psychology I (3)
CPSY 835	Psycho-oncology (3)
CPSY 861	Health Psychology II (3)

CPSY 960 Consultation & Supervision (2)

Practicum & Internship Requirements (15 hours)

CPSY 893	Practicum (1) (taken for at 9 credits)
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CPSY 993 Internship (taken for 6 credits)

Dissertation (7 hours)

CPSY 971 Clinical Dissertation (taken for at least 7 credits)*

Electives

CPSY 880	Special Topics	(Subtitle) (1-3)
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Course Descriptions

CPSY 701. Psychometric Theory & Assessment (3 hours)

The course provides an overview of psychometrics and its application to psychological assessment. Principles and methods underlying scaling techniques, rating instruments, psychological tests, and other forms of psychological measurement are addressed.

CPSY 702. Lifespan Developmental Psychology (3 hours)

This course examines normal transitions in development across infancy, childhood, adolescence, adulthood, and later adulthood. Cognitive, emotional, and social development are considered along with physical growth and development. Cultural, gender, and family influences are emphasized, and applications to clinical practice are considered.

CPSY 703. Biological Bases of Behavior

This course provides an introduction to the anatomy and the neurophysiology of the nervous system. Neurological foundations of human behavior are addressed along with an overview of endocrine processes. The impact of somatic systems on behavior and psychopathology is emphasized, and foundations of language, cognition, learning, and memory, and brain neurochemistry are examined.

CPSY 704. Integrated Primary Healthcare (3 hours)

This course focuses on contemporary cross-cutting issues in the practice of health psychology. The role of the psychologist in primary care is examined in the context of specific chronic illnesses along with considerations related to disease prevention and health promotion. Psychological factors associated with diagnosis, treatment, and treatment adherence are discussed, and cross-cutting issues related to consultation, adherence, pain management and stress and coping are introduced.

(3 hours)

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This course provides an introduction to psychotropic drugs, their neurochemical basis, mechanisms of action, and clinical applications. Principles of use and current controversies in psychopharmacology and an overview of major drugs of abuse are addressed.

CPSY 710. Cognitive and Affective Processes

This course presents current research and theory in cognitive science with a focus on both cognitive and affective processes. Topics including attention, memory, perception, decision making, language, and emotion are addressed with an emphasis on clinical application.

CPSY 711. Social Psychology and Social Neuroscience (3 hours)

This course provides an overview of representative social psychological theory and research as well as a focus on concepts and applications relevant to personality, human interaction, group dynamics, and behavior. Applications to contemporary clinical issues are considered.

CPSY 712. Research Design

CPSY 708. Psychopharmacology

This introductory course in the statistics and research methods sequence provides a survey of research design and methodologies. Correlational, experimental, quasi- experimental, and systematic single-subject designs are covered as well as basic concepts underlying the use of various experimental research methods. The course focuses on the development of critical thinking and methodological skills required to evaluate and review published research.

Ethical and diversity issues in psychological research are examined.

CPSY 714. Statistical Methods

This course includes an overview of quantitative research methods, basic concepts, and methods used in descriptive, correlational, and inferential statistics. Parametric and non- parametric statistical methods are examined with an emphasis on the requisite skills necessary for the design of rigorous and systematic quantitative research investigations.

CPSY 716. Professional Values

Students will learn about important professional issues such as licensure, accreditation, practice versus research, supervision requirements, and relationships with other health professionals. This one-hour credit course is also designed to explore current topics in ethics.

The American Psychological Association ethics codes are the framework of this course.

CPSY 717. Ethics & Professional Issues

This course explores ethical and legal issues related to professional conduct. Emphasis is placed on ethical reasoning, as well as the American Psychological Association ethical principles, and relevant state regulations. Issues related to assessment, therapy, forensics, consultation, and supervision are a primary focus.

CPSY 718. Individual & Cultural Diversity (3 hours)

This course examines cultural and racial stereotypes that influence assessment and intervention with various racial and ethnic populations in our society. An understanding of cultural differences and the unique medical and mental health needs of various populations are addressed. Group

30

(1 hours)

(3 hours)

(3 hours)

(3 hours)

(3 hours)

(3 hours)

differences that impact the utilization of health promotion, disease prevention, and disease management activities are addressed.

CPSY 721. Psychopathology

This course focuses on the description, etiology, presentation, and treatment of psychiatric disorders that typically present in adulthood. It provides a broad theoretical foundation from which to view and understand the development of psychopathology by examining theories and accounts of the development of normal and abnormal personalities and behavior. A primary focus of the course is the current DSM classification system.

CPSY 726. Health Psychology I

This course provides an introduction to psychosocial assessment and intervention methods in the context of treatment of existing health problems, illness prevention, and health maintenance. Assessment of factors influencing quality of life in chronic illness is addressed.

CPSY 731. Personality Assessment

This course examines major approaches and techniques for objective personality assessment. Theory, principles, and issues in objective assessment as well as administration and interpretation are addressed. Emphasis is placed on producing coherent descriptions of personality process within the context of professional reports.

CPSY 732. Cognitive Assessment

This course introduces major approaches and instruments for assessing intellectual and cognitive functioning in children and adults. The history of intellectual assessment and theories of intelligence are addressed with particular attention given to test administration, interpretation, and report writing skills. Laboratory sessions focusing on skill development are included.

CPSY 733. Clinical Interviewing

This course focuses on training in basic listening and interviewing skills, with emphasis on the clinical interview in the context of a comprehensive initial assessment. Students are exposed to directive and nondirective approaches to interviewing as well as related theoretical and empirical literature. Demonstrations, role-plays, and structured exercises allow development of skills in establishing the therapeutic relationship and collecting of relevant assessment information.

CPSY 743. Evidence-based Assessment and Therapy I (4 hours)

This course covers methods of assessment and intervention used in behavior analysis and cognitive behavior therapy. Emphasis is placed on varied measurement and data collection procedures central to this approach. Methods of systematically manipulating variables through single-case research designs also are introduced as means of establishing functional relationships, selecting treatment outcomes, and evaluating impact of change strategies.

CPSY 745. Evidence-based Assessment and Therapy II (3 hours)

The course provides a survey of varied approaches to psychotherapy and their common features. Topics may include interpersonal, psychodynamic, and group psychotherapy, and integrative approaches to therapy.

(4 hours)

(4 hours)

(4 hours)

(4 hours)

(3 hours)

32

CPSY 812. History and Systems of Psychology

This course provides an overview of the historical and philosophical precursors as well as major figures contributing to modern psychology. The differentiation of psychology from philosophy is examined, and attention is paid to the historical development of various theories of personality.

CPSY 833. Neuropsychological Assessment

This course covers the scientific basis of neuropsychology and neuropsychological assessment. Brain-behavior relationship, neuropsychological assessment techniques, and the uses of neuropsychological evaluation are covered. Students develop skills in the use of basic neuropsychological screening and assessment instruments through administration and interpretation.

CPSY 835. Psycho-oncology

This course introduces the student to the field of psycho-oncology, also referred to as psychosocial oncology. The student will learn about the application of behavioral science knowledge and methodology to the understanding and management of cancer patients and their families as well as the individual at high risk for cancer. The role of psychosocial factors in the etiology, prevention, detection, treatment, and rehabilitation of cancer will be explored. Emphasis will be placed upon the interaction of biological, psychological, and social factors throughout the course of malignant disease. This course will focus on adult oncology.

CPSY 861. Health Psychology II

This course focuses on contemporary cross-cutting issues in the practice of health psychology. The role of the psychologist in primary care is examined in the context of specific chronic illnesses along with considerations related to disease prevention and health promotion. Psychological factors associated with diagnosis, treatment, and treatment adherence are discussed, and cross-cutting issues relating to consultation, adherence, pain management, and stress and coping are introduced.

CPSY 865. Child Psychopathology

This course introduces students to the theories, models, concepts, and terminology of developmental psychopathology. Etiologies of childhood disorders and their continuity across childhood, adolescence, and adulthood are considered. Methods for cognitive, personality, and neuropsychological assessment are addressed as well as implications for working with diverse populations of children and adolescents.

CPSY 874. Child and Family Behavior Therapy (3 hours)

Behavioral assessment and treatment approaches to the major disorders of childhood are surveyed. Specific strategies for intervention in dysfunctional parent-child interaction, as well as parentadolescent and parental discord, are covered. Attention is directed to working with diverse populations of children and families.

CPSY 880. Special Topics (subtitle)

This course provides opportunities to address selected topics of specific faculty expertise or student interest. Topics may be offered to students in small groups or on an individual basis.

(3 hours)

(3 hours)

(1-3 hours)

(3 hours)

(3 hours)

(1 hour)

CPSY 893. Practicum

The nine-course practicum series involves supervised clinical field experiences with primary foci on assessment and therapy to develop the requisite knowledge and skills of the core competencies. Students will demonstrate increasing knowledge and skills over the series of courses. In addition to required hours at the assigned training site, students meet weekly in a practicum seminar led by a faculty member. Beginning in the fall semester of year two, students will progress through at least nine semesters of practicum experiences.

CPSY 960. Consultation & Supervision

This course incorporates theory, research, and practices relating to clinical supervision and consultation within ethical, multicultural and interdisciplinary contexts. It explores the manner in which psychologists function as supervisors and consultants in community, educational, and healthcare settings.

CPSY 971. Clinical Dissertation

Following admission to doctoral candidacy, Psy.D. students undertake independent clinical research such as a methodologically-based literature review, program evaluation, development and pilot data on a clinical assessment or intervention protocol. The project is undertaken under the guidance of their doctoral dissertation chair and committee. Students will enroll in CMP 971 during multiple semesters, with a minimum of 7 credit hours.

CPSY 993 Internship

Prerequisites: Completion of comprehensive examinations and all coursework, except the dissertation. This course entails enrollment at the start of a 1 or 2 year internship, with repeated enrollment for the duration of internship. The total number of credits awarded for internship is fixed at 6.

(1 hour)

(1-3 hrs)

(1-3 hours)

(2 hours)

Practicum Guidelines

Purpose of the Practicum Experience

Practicum and internship are the supervised out-of-class contacts with clinical populations that take place within a health care delivery system. Practicum training provides an environment for students to apply theoretical knowledge, to practice implementation of techniques based on this knowledge, and to foster professional and personal attitudes important to the identity of a professional psychologist.

A primary goal of practicum training is the development, by means of supervised direct client contact, of competent and ethical clinicians able to deliver basic and effective assessment and therapeutic intervention skills. Ethical standards of the American Psychological Association are incorporated into student training.

General Information

Practicum placements follow the 12-month academic calendar (August through July). Specific starting and completion dates may vary. The only exception to this schedule are sites, such as College Counseling Centers, that are closed during the summer. Students spend 16 to 20 hours per week in an agency or program formally affiliated with the school. Students provide 8 to10 hours of "direct service" (as defined below) per week. The remaining time can involve supervision, paperwork, "indirect service" activities, research, and "training activities." Students typically accrue a minimum of 500 hours in the practicum training experience over the course of the academic year.

Doctoral students receive a minimum of one hour of individual supervision per week from a licensed doctoral-level psychologist at the practicum site. The second hour of required weekly supervision may be provided in a group setting at the practicum site. In addition, all students must enroll in a weekly practicum seminar led by a faculty member who provides didactic training emphasizing diagnostic and intervention skills applicable to a variety of clinical populations and an opportunity for consultation. The specific content and emphasis varies according to the practicum setting and expertise of the faculty member.

Definitions

- *"Direct service"* includes face-to-face provision of psychological services to individuals designated by the agency/program.
- *"Indirect service"* may include community outreach, consultation, education, program development and/or evaluation, and support services (e.g., report writing, record maintenance, or case preparation).
- *"Training activities"* include formal supervision, case conferences, case management/utilization review meetings, rounds, administrative/planning meetings, inservice training/seminars, and co-therapy with senior mental health staff.

Professional Liability Insurance

All students enrolled in practicum placements must be covered by Professional Liability Insurance. Although students are covered through Mercer University College of Health Professions, students are encouraged to purchase additional coverage through American Psychological Association American Professional Agency, Inc.

Practicum Training Sites

Provisional approval is granted to a site until it is determined that it can provide the type of practitioner training Mercer University requires. Full approval is granted after a student has successfully completed a practicum and it is determined that this experience has been positive for both the student and the agency.

Training sites are selected based on their overall appropriateness to the use of the practitioner model of training graduate level psychology students, i.e., emphasis on the acquisition of clinical skills, relevant treatment population, credentials of staff and site (registration, licensure, accreditation, etc.), availability of adequate supervision by experienced clinicians (licensed doctoral-level psychologists), and an emphasis on training. Every effort is made to be certain that students receive competent supervision within a mentoring relationship in an environment conducive to learning and that supervision requirements can and will be met by the training site. Supervision requirements are detailed in a subsequent section of this guideline.

Policy on Training Sites with Creedal Statements

Mercer University has a policy of nondiscrimination against students with regard to race, age, ethnic background, and sexual orientation. Practicum sites are expected to conduct their selection and training in a nondiscriminatory manner.

Sites are expected to select applicants without regard to race, sex, age, ethnic background, or sexual orientation unless they have compelling legal or therapeutic reasons for limiting the applicant pool. Sites that have a selection policy that disallows students based on any of the above criteria must notify the school and clarify the legal and/or therapeutic rationale for such policies. Such sites will be approved by Mercer University if the Director of Clinical Training in consultation with the Clinical Psychology faculty determines that an adequate legal and/or therapeutic rationale exists for the selection policies.

Practicum Application Procedures

During the spring semester, the Director of Clinical Training assigns each student to interviews at different practicum sites. Assignment of interviews involves the appropriate matching of the student's needs, level of experience, and clinical interests with available approved training experiences. Students contact the sites and schedule interviews during a designated time period. Students who do not follow the guidelines for placement can expect disciplinary action.

Once a student accepts an offer, this verbal acceptance is binding and viewed as a contractual agreement between Mercer University, the practicum site, and the student. The Director of Clinical Training also must be notified in writing of any acceptance or rejection of a placement offer.

Supervision Requirements for Practicum

Trainees receive a total of two or more hours of supervision and training per week on site. At least one of these hours must be spent in primary individual supervision with a licensed doctoral level psychologist. Primary supervision is offered at a regular, preset, uninterrupted time each week. Supervisors are expected to communicate clear expectations to students at the beginning of their practicum and to provide clear feedback regarding clinical competence and progress throughout the year. Students are required to audiotape or videotape some of their clinical work to be played in individual supervision and in their practicum seminar on campus.

The immediate Clinical Supervisor(s) agree to base the student's evaluation in part on direct observation, to include live observation (in-room or via one-way mirror), video streaming, or video recording.

The Director of Clinical Training should be informed immediately of any difficulties encountered at the practicum site or of any substantive changes in the practicum experience (e.g., change of supervision).

In accordance with the APA Standards of Accreditation Implementing Regulations Section C-13 D. Telesupervision, practicum sites using any amount of telesupervision must have a formal policy addressing their utilization of this supervision modality. This includes, but is not limited to, an explicit rationale for its use, how telesupervision is consistent with the site's overall aims and training outcomes, how and when telesupervision is utilized in clinical training, how it is determined which trainees can participate in telesupervision, how the program ensures that relationships between supervisors and trainees are established at the onset of the supervisory experience, how an off-site supervisor maintains full professional responsibility for clinical cases, how non-scheduled consultation and crisis coverage are managed, how privacy and confidentiality of the client and trainees are assured, and the technology and quality requirements and any education in the use of this technology that is required by either trainee or supervisor. Please consider the following:

Rationale for Telesupervision: We use telesupervision as an alternative form of supervision when in-person supervision is not practical or safe. Telesupervision may be used in three scenarios: a) As a primary mode of supervision when offering services to a remote community with a supervisor who lives outside the metro-Atlanta community to provide training opportunities that would not otherwise be possible, b) As a secondary mode of supervision when either the trainee or supervisor is ill to prevent contagion or worsening of the illness, d) As an emergent mode of supervision when clinical emergencies arise that require more detailed consultation than is available through telephonic methods when the supervisor is not at the training site.

Telesupervision's Consistency with Program Aims and Training Outcomes: In scenario a), telesupervision offers trainees experiences that would otherwise be unavailable to them and that allow trainees to provide services to underserved populations. In scenario b), telesupervision maintains the continuity of supervision during unexpected events that do not compromise a supervisor's or trainee's fitness to practice but that would impede meeting in person and providing continuous care to clients. In scenario c), telesupervision provides supervisors the ability to backstop trainees as they provide emergent care to clients.

How and When Telesupervision is Used in Clinical Training: Telesupervision is not allowed as a primary mode of supervision until students have completed their first year of training. Students will be allowed to participate in telesupervision as a method of receiving supervision when telesupervision is a) indicated for service provision, b) reasonable as a secondary supervision modality, or d) required to address emergent client needs.

How Trainees are Determined Fit to Participate in Telesupervision: Trainees must demonstrate proficiency with using videoconferencing technology and exhibit non-defensive participation in supervision with the ability to implement a supervisor's feedback with clients. They must exhibit the organizational skills needed to attend telesupervision, the responsibility to protect client privacy and confidentiality, and the clarity in communication necessary to convey relevant information about clients and their clinical care.

How Trainee-Supervisor Relationship is Established at Outset of Supervision: Before beginning telesupervision, the supervisor and trainee will engage in at least one virtual session to test out technology, verify the suitability of the trainee's environment for telesupervision, and work through screen sharing and other functions that may be required in telesupervision.

How Off-Site Supervisor Maintains Full Professional Responsibility for Cases: The supervisor who conducts telesupervision will maintain full oversight and professional responsibility for all clients for whom the trainee provides services. Supervisors will maintain operational competence with HIPAA-compliant software, remain accessible to trainees with flexibility in using telesupervision as supervisor and trainee situations dictate, and evidence warmth and connection with trainees through virtual meeting technology.

Management of Non-Scheduled Consultation and Crisis Coverage: Supervisors are available by phone, text, or email outside of scheduled supervision times should trainees need consultation. Supervisors will maintain standing invitations to trainees' virtual sessions to provide backup for trainees. Telesupervision that must occur outside of scheduled sessions will be scheduled through email, text, or other means of communication without discussing client information.

Maintenance of Client and Trainee Privacy and Confidentiality: During telesupervision, client material will not be discussed without using HIPAA-compliant technology. Both trainee and supervisor will also be in private locations during telesupervision where patient privacy and

confidentiality will be assured, which may include using headphones or other in-ear technology and orienting computers or phones toward walls without windows.

Technology and Technology Training Used in Telesupervision: Mercer's HIPAA-compliant Zoom accounts provide the technological backbone of telesupervision at Mercer PRACTICE. Sites note using HIPAA-compliant Zoom accounts will provide alternative HIPAA-compliant videoconferencing methods to trainees at no cost to them.

Practicum Seminars

The practicum seminar serves as an auxiliary training component in a student's clinical training. The seminar leader works as a "partner in training" with the student's on-site supervisor to oversee education. Although the seminar leader may provide general feedback about student progress, supervision of individual cases remains the responsibility of the on-site supervisor, who has direct contact with the practicum setting and with individual patients.

In the seminar, students receive didactic training, present their clinical work, and consult with peers and the seminar leader regarding challenging assessment and treatment issues. The major objectives include: (1) introducing, via didactic and experiential training, fundamental skills in conceptualization and clinical service; (2) providing exposure to a variety of clinical issues in different settings; (3) enhancing students' capacity to generalize their clinical experiences across domains and groups; (4) fostering students' development in specific technical interventions and global clinical competencies; and (5) evaluating students' progress in professional development and growth in the major areas of competency.

All practicum students are required to attend a weekly practicum seminar throughout the academic year. Students present, on a rotating basis, audiotapes or videotapes of their diagnostic interviews, as well as testing protocols and reports only after the site supervisor has evaluated the student's work. Seminar leaders' feedback should not be considered as supervision of the on-site clinical work; site supervisors are ultimately responsible for the content of reports that will be utilized for clinical purposes. When turning in testing protocols and reports to seminar leaders, all identifying information should be removed to ensure client confidentiality.

Practicum

Clinical orientations, specific treatment options and opportunities, and client populations will vary across training settings. Mercer University does not endorse a particular theoretical orientation and encourages students to explore a variety of evidence-based treatment perspectives. However, sites are encouraged to provide knowledge and modeling of therapy within an organized theoretical framework, so that students may learn to use this framework to guide their conceptualizations and interventions. With time and experience, students may recognize strengths and limitations of a variety of approaches and develop proficiency in formulating and working within an approach best suited to their own personal style and clinical interests. The therapy practicum presents an excellent opportunity for this kind of learning.

Practicum students are expected to adjust to and work in an established program in a way that is mutually beneficial to the training site and to students' professional growth. The learning that takes place in such an environment will transfer to other clinical situations and become an integral part of the foundation for sound clinical practice in the future.

Evaluation of Student Progress in Practica

Grades

Each semester, practicum supervisors and seminar leaders evaluate students in several areas of clinical functioning, including theoretical knowledge base, clinical skills, and professional attitudes. A formal evaluation form is provided, and it is expected that supervisors will review this written evaluation form with the student and provide direct feedback regarding the student's clinical strengths and weaknesses. Students are responsible for returning supervisor evaluation forms to their seminar leader on a timely basis.

Seminar leaders will maintain primary responsibility for monitoring student progress and will evaluate student progress each semester. The seminar leader will review evaluation forms submitted by site supervisors and the student's evaluations of his or her practicum site. The seminar leader will discuss each student's progress with his or her site supervisor and will assign a grade of satisfactory/unsatisfactory ('S'/'U') each semester.

Any students who experience difficulties of any kind on their practicum are encouraged and expected to consult with their seminar leader and the Director of Clinical Training as appropriate. Practicum supervisors are advised to contact the Director of Clinical Training with their concerns as they arise.

Procedures for Minor Practicum Remediation

Requests for minor remediation within the ordinary time frame of practicum placement can be handled informally. This request might come from any relevant personnel such as supervisors, seminar leaders, or the Director of Clinical Training. Such remediation would be part of ongoing course work and handled as other in-course assignments, typically through consultation between the seminar leader and practicum supervisor.

Process for Remediation of Clinical Skills

Students on practicum who may need remediation in clinical training are referred to an ad hoc Student Professional Development & Support (SPDS) committee, which will examine all pertinent information related to the student's clinical competency. The goal of the SPDS committee goal is to assess clinical and professional deficiencies and develop a remediation plan accordingly. The remediation plan may include additional training, additional coursework, remedial practicum, or remedial internship. Consequences for failing to meet the remediation plan goals will be noted on the remediation plan. The Director of Clinical Training will oversee and track the progress of students on all SPDS committees related to clinical competencies.

Professional Conduct

Students are expected to conduct themselves in an ethical and appropriate manner at the Clinical Training Site and to become familiar with the *Ethical Principles and Code of Conduct* and *Guidelines for Providers of Psychological Services* published by the American Psychological Association as well as duty to warn and confidentiality requirements of professional psychologists in the state of Georgia. Furthermore, students are expected to follow the College of Health Professions guidelines stated in the community of respect section of the Student Handbook.

Students are expected to conduct themselves in a manner consistent with the principles of the profession of psychology at all times, including outside of the classroom and practicum. Enrolling in the practicum and signing the Individual Training Agreement constitute an agreement to abide by these guidelines. The following are examples of inappropriate and/or unethical behaviors on a practicum:

- 1. Acting in a manner inconsistent with the tenets of psychology as published in the *APA*: *Ethical Principles of Psychologists and Code of Conduct*, and/or duty to warn and confidentiality requirements of professional psychologists in the state of Georgia.
- 2. Failure to follow program guidelines.
- 3. Failure to appear for any scheduled event at a training site without notifying the supervisor in advance of absence.
- 4. Taking vacation time without obtaining prior approval from the supervisor.
- 5. Taping an interaction or playing a tape of an interaction with a patient without the express permission of the supervisor and patient.
- 6. Removing materials from the training site without approval of the supervisor.
- 7. Withdrawing from the training site without permission of the program.
- 8. Accepting a training site then turning it down to accept another.
- 9. Inappropriate use of computer-generated interpretive reports.

Consequences for failure to meet the professional conduct expectations of the program and Mercer University may result in verbal warnings, written warnings, referral to an SPDS committee, a remediation plan, probation, or dismissal.

Responsibilities Concerning Practica

Practicum experiences unite student, practicum agency and supervisor, and Mercer University in a working relationship in which all parties are responsible to each other as discussed in the sections below.

Site Supervisor

Site supervisors have the responsibilities outlined below:

• Clear expectations of student participation should be communicated to students at the beginning of the practicum.

- Regular, preset, uninterrupted supervision time and clearly articulated expectations for use of supervision (tapes, process notes, etc.) are required.
- Adequate clinical opportunities to meet student training needs should be provided.
- Clear feedback to students regarding clinical competence and progress should begin early in the training year and be ongoing throughout. There should be timely completion and return of student evaluations each term.
- The Director of Clinical Training should be informed of any difficulties encountered at the practicum as early as possible and should also be notified of any substantive changes in the practicum experience.
- Students should be oriented to the agency, including record keeping and expectations for professional conduct, before they begin their clinical work.
- The agency or program on-site director or supervisor receives no reimbursement for these services from the Clinical Psychology program. The on-site supervisor or director provides no personal therapy to the student and accepts no reimbursement from the student.

Director of Clinical Training

The Director of Clinical Training is responsible as outlined below:

- The Director of Clinical Training will provide students with up-to-date practicum resource materials describing approved practicum experiences, prerequisites, expectations, and placement procedures.
- The Director of Clinical Training, with assistance of other Mercer University faculty, will advise students in the practicum selection and application process in order to secure a good match between student training needs and training site offerings/requirements.
- Together, the Director of Clinical Training and the practicum seminar leader will monitor student progress during practicum training and will be available for consultation and advisement to the practicum site and student.
- The Director of Clinical Training will develop new training sites and recommend their affiliation to Mercer Clinical Psychology faculty.
- The Director of Clinical Training will regularly visit, call, and write to individual practicum sites and facilitate a close training relationship between the school and the site.

Practicum Students

Students are responsible as outlined below:

- Students are expected to conduct themselves in reliable, ethical, and appropriately professional ways in all practicum activities, including timeliness, notification of absences, permission for vacation, and other professional responsibilities.
- Students should integrate themselves into training sites and develop good working relationships with staff and patients.
- Students are expected to comply with policies and procedures at their community placement sites. Students are expected to seek clarification of any confusion or uncertainty about these policies and procedures as soon as possible with their practicum on-site supervisor or with the Director of Clinical Training.

- Cultivation of an attitude of openness to self-examination and new learning is expected.
- The Director of Clinical Training should be advised of any difficulties encountered at the practicum; students are expected to seek advisement and consultation in a timely manner with seminar leaders or with the Director of Clinical Training when any concern exists.
- The Director of Clinical Training should be notified of safety concerns students may have at a training site.

Practicum Guidelines Signature Page

I acknowledge receipt of the Practicum Guidelines. I hereby understand all guidelines and will uphold all requirements set forth for the Community Practicum.

Student Trainee (please print)	Student Trainee (signature)
	Address
	City, State, and Zip Code
	Phone Number
	Email Address
Agency Name	Address
	City, State, and Zip Code
	Phone Number
	Email Address
Onsite Practicum Director Name (please print)	
Onsite Practicum Director Name (signature)	Date
Onsite Practicum Supervisor Name (please print)	
Onsite Practicum Supervisor Name (signature)	Date

Clinical Competency Portfolio (CCP) Guidelines

The CCP is a comprehensive assessment designed to evaluate doctoral students' competencies throughout their clinical training in the program. These components are completed at various stages of training, ensuring a thorough evaluation of students' clinical skills and development throughout their training. The Clinical Competencies Portfolio comprises five elements.

- Assessment Report: A de-identified assessment report from an intake, semi-structured interview, structured diagnostic interview, or psych/neuropsychological testing. <u>Timing:</u> Completed during the students' second year in the program. <u>Submission</u>: Students will first submit the assessment report to the seminar leader for feedback in the spring semester of the second year. Students can make revisions based on the seminar leader's feedback. The final report will be submitted to the Director of Clinical Training (DCT) during the summer semester of students' second year in the program. The DCT will then assign a faculty member, who is not the students' practicum seminar leader, to review the assessment report using a standardized rubric.
- <u>2</u>. *Intervention Write-Up*: A de-identified therapy write-up that integrates the presenting problem list, psychosocial history, case conceptualization, treatment goals, treatment plan, and treatment course.

<u>Timing</u>: Completed during the students' third year in the program. <u>Submission</u>: Students will first submit the intervention write up to the seminar leader for feedback in the spring semester of the third year. Students can make revisions based on the seminar leader's feedback. The final version will be submitted to the Director of Clinical Training (DCT) during the summer semester of students' third year in the program. The DCT will then assign a faculty member, who is not the students' practicum

<u>3.</u> Advanced Case Presentation Project: Case presentation projects should demonstrate competence in the areas of differential diagnosis and rationale, case conceptualization, linking of theoretical concepts with therapeutic interventions, and description of the course and outcome of therapy.

seminar leader, to review the intervention write-up using a standardized rubric.

<u>Timing:</u> Completed during the summer semester of the third year. Students will deliver case presentations in each practicum seminar leading up to this final presentation to gain experience and feedback from the practicum seminar leader. Presentation: Students will present a 30-minute case presentation (20 minutes

presentation + 10 minutes Q&A) to pairs of faculty members during the first two weeks of June. Case presentations will be evaluated using a standardized rubric.

 <u>4.</u> Practicum Evaluations: All practicum evaluations from each semester of practicum. <u>Timing:</u> Completed annually at the conclusion of each practicum placement. <u>Submission</u>: Students are responsible for ensuring that the program receives practicum evaluations for each semester that they have completed practicum. <u>Requirements</u>: In order to pass this element of the CCP, competency evaluation items on Final/End of Year Practicum Supervisor Evaluation Forms each year must be rated no lower than a mean value of 3 [OFTEN does this (or often demonstrates this quality or characteristic), more often than not, about 75% of the time (Satisfactory)]. The supervisor also needs to indicate in their summative evaluation that the student is progressing as expected (Satisfactory).

 Self-Reflections: Self-reflections focusing on students' clinical growth each year. <u>Timing:</u> Completed annually at the conclusion of each year starting in the second year. <u>Submission</u>: Students must submit a self-reflection of their clinical experience and growth at the end of each year, resulting in a total of three self-reflections submitted.

Dissertation Guidelines

These guidelines are designed as the primary resource for information about the clinical dissertation process from start to finish. Students are strongly encouraged to review these guidelines prior to developing a dissertation topic, selecting a dissertation chair/advisor, and selecting committee members. The latest edition of the *APA Publication Manual* should be used as the primary guide for editorial style and word processing instructions.

The clinical dissertation is the capstone project of the Psy.D. degree; its objective is to provide the student with a mentored experience in integrating and applying empirical research in order to address a specific issue in health service psychology. In some respects, the clinical dissertation resembles a traditional research dissertation (i.e., in organization and editorial standards). However, the orientation of the project is focused on clinical applications of the empirical knowledge base, rather than on the production of original empirical research. In this way, the clinical dissertation is consistent with the Psy.D. practitioner-scholar model. The primary training goal of the clinical dissertation is the development of skills needed to become critical consumers of the empirical literature. The final product should be of potentially publishable quality and should represent a significant scholarly contribution to the field.

Scope of the Dissertation

A broad range of inquiry is permitted in the dissertation. Students are expected to focus upon a psychological issue that is grounded in theory and that is addressed by current research. The appropriateness of the project is determined by the dissertation chair and committee member, and it should represent a potentially publishable review or study that could be presented to professional psychologists in a conference or workshop setting. Students are not limited to research on clinical populations. All students, however, are required to provide a clinical rationale for proposed projects. The final dissertation document should demonstrate the following:

- Mastery of theoretical, clinical, and empirical literature relevant to the topic studied.
- Methodological and statistical knowledge relevant to the area of inquiry.
- Ability to integrate specific research findings and synthesize them to develop clear conclusions.
- Ability to write clearly and concisely in the style adopted by the profession.

Beyond those requirements, the clinical dissertation may take a variety of forms, including

- A systematic literature review.
- Treatment development with production of a written manual or adaptation of an existing empirically-supported intervention.
- A case report (of a series of individuals or a group) or controlled single-subject study.
- Program development and/or evaluation.
- A new statistical analysis of archival data.
- Original empirical research (study design, data collection/analysis, and reporting of results).

The format of the dissertation proposal and the final document will be determined in collaboration with the student's dissertation chair. Other types of projects not listed here may also be considered, as long as they meet the requirements for demonstrating mastery of scientific literature and the ability to apply scientific theory and research to a clinical issue or problem.

Sequential Steps for Completing the Dissertation

The sequence of procedures required to successfully complete the dissertation is listed below, along with recommended timelines and specific deadlines. Each of these procedures is described in some detail in separate sections of these guidelines. Students should

- 1. Develop *preliminary* topics/questions of interest during the 1st year of the program.
- Review core faculty members' areas of expertise and determine the best match for your own topics of interest. Complete the rank ordering form for your choice for your Dissertation Chair by October 1st of your 2nd year. You will receive your assigned Dissertation Chair by November 1st of your 2nd year.
- 3. Choose an additional dissertation committee member (from among the other core or adjunct faculty members) after discussing possible candidates with the dissertation chair.
- 4. With support and guidance from your dissertation chair, research and refine the topic during your 2nd year, building toward the development of your dissertation prospectus (i.e., brief background literature, justification, and plan). The planned schedule of meetings (on the prospectus form) *may* be completed at this time.
- 5. Submit your final prospectus to your dissertation chair by September 1st of your 3rd year.
- 6. With support and guidance from your dissertation chair, prepare a formal proposal for the dissertation. Note that multiple drafts will be required.
- 7. Upon approval from your dissertation chair, submit the dissertation proposal to the other committee member(s) at least two weeks in advance of your dissertation proposal defense.
- 8. Schedule the dissertation proposal defense meeting date and time with committee members and submit a completed *Dissertation Proposal Defense Scheduling Form*, along with a request to reserve a meeting room, to the Program Specialist.
- 9. Defend the proposal to the dissertation committee **no later than June 1**st **of your 3**rd **year**.
- 10. Complete required dissertation proposal revisions no later than July 1st of your 3rd year.
- 11. Submit *Oral Defense of Dissertation Proposal Form* and a copy of the dissertation proposal to the Program Specialist.
- 12. With guidance from your dissertation chair, implement the project and prepare the dissertation document. Note that multiple drafts will be required. Each new draft should include a response to feedback letter, documenting how you specifically addressed each piece of feedback from your chair in the prior draft.
- 13. Upon approval from your dissertation chair, submit the dissertation document to the other committee member(s) for review at least two weeks in advance of your dissertation defense.

- 14. Schedule the dissertation final defense meeting date and time with committee members and submit a completed *Final Dissertation Defense Scheduling Form*, along with a request to reserve a meeting room, to the Program Specialist.
- 15. Complete the oral defense of the completed dissertation with the dissertation committee, no later than December 15th of your 5th year (while on internship).
- 16. Submit the Final Oral Defense of the Dissertation Form to the Program Specialist.
- 17. Make any final revisions to the dissertation document **no later than February 1st of your 5th year**.
- 18. Submit a printed, hard-bound copy of your dissertation to the Department no later than March 1st of your 5th year. One site commonly used is: <u>https://phdbookbinding.com/</u>. Students typically produce additional copies for themselves and their dissertation chair. The bound document must include all pages of the final dissertation, including the completed signature page.

When to Start

Students should begin thinking about possible dissertation topics from the onset of their time in the program and as they progress through the program curriculum in the first year. The dissertation process is, first and foremost, a training experience. The student should think about what general topics they are drawn to in the field and what faculty members have a shared interest. While the first year should be a time of exploring general areas of interest, once students have rank-ordered their preferences for a dissertation chair and received their match, they should work with their dissertation chair during their second year to refine their topic and develop their prospectus, which must be submitted by September 1st of their third year. The dissertation proposal must be defended by June 1st of the third year.

Registration

Registration for dissertation credit begins when students are actively working on their dissertation. From this point forward, students should expect to be continuously registered for dissertation credit during the fall, spring, and summer semesters until the project is successfully defended. Enrollment for dissertation credit must continue during the student's doctoral internship. If the dissertation is not completed prior to finishing internship, the student must register for an extended dissertation credit each semester until the project is completed. Students who have finished all coursework and have not started internship must also register for dissertation credits until the project is completed.

Choosing a Topic

Students should choose a dissertation topic that is genuinely of interest to them. Any significant scholarly work requires a long-term commitment, and it is difficult to sustain the necessary commitment to the dissertation process if the student is not truly invested in the outcome. Students must appropriately limit the scope of their dissertation topic in order to complete the project in a timely manner.

Dissertation topics must be clinical in nature or have a clear clinical application. The topic must be relevant to professional practice. The student should expect to have a number of discussions

with their Chair and to conduct a minimal literature review before finally deciding on a topic. Students may approach more than one faculty member to discuss ideas during the first year as they are working to narrow down their areas of interest.

Selecting a Committee

Students are required to have two faculty members in the clinical psychology program on their dissertation committee. Both the dissertation chair and the second committee member ("second reader") must be core faculty members. In consultation with the dissertation chair, if a student wishes, they may also ask a third member to sit on the dissertation committee. This third member may be an adjunct faculty member, a practicum supervisor, or an academic or health service professional who is not formally affiliated with the Clinical Psychology program.

At least one member of the committee should have some expertise in the content area of the research. If the student selects a third committee member, she or he may be selected for a variety of reasons (e.g., a practicum supervisor who is especially familiar with the student's dissertation topic, a faculty member in another program who has expertise regarding the chosen dissertation topic).

All members of the student's dissertation committee must attend the proposal defense and the final dissertation defense. Committee members must be available to attend any additional meetings requested by the student's dissertation committee chair.

The Dissertation Committee Chair

The dissertation chair is the faculty member with whom the student will work most closely and the committee member with the greatest authority within the committee. The chair acts as the major advisor, although other committee member(s) may also help to develop the dissertation and provide suggestions for changes to dissertation documents. It is important that the student and chair discuss the composition of the committee and the working style of the committee.

The dissertation chair is the first and major line of quality control on the dissertation committee and, as such, must be highly critical and evaluative. To maintain a good working relationship, students should bear in mind that the responsibility for the quality of the work and its timely completion is primarily theirs. A timeline for completion of the project should take into account faculty schedules. The student should remember that faculty members may be on leave between terms and/or during the summer months.

In order to develop a good working relationship, the student should communicate his or her needs clearly to his or her dissertation chair. The chair works closely with the student to set realistic goals and to provide guidance for completion of tasks.

Dissertation Committee Members

When selecting the dissertation committee, the student should be sure to consider any possible conflicts of interest or dual relationships. Examples of possible dual relationships include

working with personal therapists, business associates, employers (including a licensed psychologist to whom the student reports as a psychological assistant), friends, or relatives. Dual relationships should be avoided when possible.

Changes in committee members are rare and require that the student request formal approval from the Department Chair. Such a request should provide a clear rationale for requesting the change. Dissertation chairs or committee members who leave the program's faculty may continue to serve on the committee if that is mutually acceptable. If it is not, students can discuss potential replacements with the Department Chair.

The Dissertation Proposal

The dissertation proposal is composed of a review of the literature, the clinical rationale for examining this particular dissertation topic, and a detailed outline of the procedures that will be used in the project, including the planned analysis of findings. The specific content and structure of the dissertation proposal are developed jointly with the dissertation chair. The proposal document may be relatively brief but is expected to be a minimum of 10 pages of text (excluding title page, abstract, references, and appendices). If appropriate, the proposal may be used, with revisions, as the introduction to the final dissertation document.

Proposal Defense

The formal defense of the dissertation proposal is designed to ensure that the student has a workable plan that meets the standards of scholarship and scientific sophistication appropriate to earning a doctoral degree. The student may be questioned about any aspect of his or her dissertation proposal. Students should be prepared to explain their topic, specific issues, clinical rationale, the proposed method, and the scope and quality of the published literature.

The student should make sure that all dissertation committee members are given sufficient time to read and reflect upon the proposal prior to the defense. When the proposal defense is planned, each committee member should be asked how much time in advance of the meeting he or she would like to review the document. Typically, students work with their dissertation chair on a number of drafts before other committee members review the proposal. Committee members should have approximately two weeks for reading, reflecting, and discussion before the proposal defense is scheduled.

Students are responsible for scheduling their proposal defense with committee members and with the Program Specialist. The proposal defense is usually scheduled for 2 hours. Students must submit the *Dissertation Proposal Defense Scheduling Form* to the Program Specialist as soon as the date is set with the faculty.

Outcomes of the dissertation proposal defense include pass, fail, and pass with minor or major revisions (pass with revisions is the most common). At the discretion of the committee, revisions may require approval from all committee members or only from the dissertation chair.

The dissertation chair and committee members will sign the *Oral Defense of the Dissertation Proposal* form after the defense has been passed or when it has been decided that subsequent revisions do not need full committee review. Students should bring this form to the defense meeting, obtain signatures from committee members, and then submit it and a copy of the approved proposal to the Program Specialist.

Final Dissertation Document

The dissertation document should contain clear conclusions about, and implications for, the issue addressed by the project. As a significant piece of scholarship, the final dissertation document should be well-organized, well-written, and professionally presented. More detailed information about the content and structure of the final dissertation document is provided below.

Final Dissertation Defense

When the committee members are satisfied with the dissertation document, they will inform the student that she or he may proceed to the final dissertation defense. The student must provide the final document to the dissertation chair and committee member(s) at least two weeks before the defense. The *Dissertation Final Defense Scheduling Form* should be submitted to the Program Specialist so that a room can been reserved for the defense meeting.

During the final dissertation defense, the student presents a synopsis of her or his work that includes the rationale for the topic chosen, methods, primary findings, and conclusion. This presentation serves as a basis for questions and comments from the dissertation committee. Like the proposal defense, the final defense is an examination of the scholarship and the quality of both the research and the written document. The student must be prepared to discuss all aspects of his or her project, including theoretical and clinical implications and methodological strengths and weaknesses of the research.

The student must bring the *Final Oral Defense of the Dissertation* form to the final defense. All dissertation committee members sign this form upon successful completion of the defense. Then the student submits the form to the Program Specialist. Even though the student may have successfully defended the dissertation, committee members may ask him or her to make specific revisions to the dissertation document. These revisions must be completed, with the dissertation chair's approval, before the document is submitted for binding.

Submission of the Completed Dissertation Document

Students who are required to make specific changes to the dissertation document in the final defense must do so, and obtain approval from the dissertation committee, within the deadlines noted above. Committee members sign the signature page of the dissertation only after all revisions to the document have been completed. Once all revisions are approved, students send the dissertation document for binding. In order to be eligible to participate in the campus graduation ceremony, students must submit the final bound copy of the dissertation to the Program Specialist by the established deadline.

Dissertation Project Documents

Please note that the student is responsible for the academic integrity of all work associated with the dissertation project. Although committee members may provide editorial input and assistance with tasks such as statistical analyses, all components of the dissertation must represent independent, original scholarship (e.g., enlisting a statistical consultant to conduct analyses or using a professional copyeditor would be ethical violations).

Dissertation Proposal

The dissertation proposal should contain at least three major sections. These are

- Statement of the Problem/Clinical Rationale
- Preliminary Review of the Literature
- Proposed Methods

Note that these are not required headings; a different organizational format may be chosen by the student in consultation with the dissertation chair. However, all dissertation proposals will include background (making clear the clinical relevance of the project), an initial literature review, and a comprehensive outline of the proposed methods and procedure.

Proposals must be written in APA style in accordance with the current edition of the *Publication Manual*. In general, the student should assume that the readers are knowledgeable psychologists but ones who may not be experts in the specific topic area.

Statement of the Problem/Clinical Rationale

The first section of the proposal should provide the introduction to the problem or issue that will be addressed by the dissertation project. This introduction should demonstrate the theoretical and/or practical significance of the topic, as well as the general approach used to address this topic in the empirical literature. A major goal of the dissertation is to demonstrate that the student can critically evaluate the empirical literature or conduct an empirical investigation to address a psychological issue that is relevant to professional practice. This section should make the clinical rationale of the proposed project explicit. It should end with a clear statement of the primary focus of the dissertation.

Preliminary Review of the Literature

This section should contain a brief, critical review (i.e., including synthesis and analysis of previous studies, not just straightforward reporting of findings) of the literature relevant to the dissertation topic. If the proposed dissertation is a systematic review, this section will primarily serve to highlight the research question and review a few exemplary studies that have contributed to the development of that question. The student's dissertation committee must determine whether there is a sufficient literature to support the proposed study. Committee members should be given an indication of the amount and quality of the existing empirical literature available to address the proposed dissertation topic. Thus, it is important that the initial review includes enough articles to give committee members a sense of the amount of literature available, the variability of types of studies, and the quality of the published research.

Proposed Methods

The dissertation proposal should offer a clear, systematic research plan to be followed. It should describe the conceptual framework, literature review strategy or other research methods, plans for data analysis, and hypotheses. The exact content of this section will vary depending on the format of the proposed project but will generally include a description of:

- The clients, participants, or subjects involved (in a meta-analysis or systematic review, studies, not participants, are the subjects; criteria for study inclusion should be proposed).
- Measures that have been used in previous investigations or will be used in the current project (provide a citation and brief description for each measure and a summary of its psychometric properties).
- Treatments or variables that will be manipulated.
- Procedures (in sufficient detail for someone else to conduct the study).

Final Dissertation Document

The final document will vary somewhat in length, format, and organization based on the type of dissertation project completed. However, all dissertation documents should be prepared in accordance with the current edition of the *APA Publication Manual*. The final dissertation is expected to be a minimum of 20 pages of text (excluding references and appendices). The *APA Publication Manual* is the authority both for writing style and formatting instructions.

Editorial Style and Grammar

Most errors in editorial style occur because students do not realize there are rules to organization, hyphenation, headings, seriation, indentation of long quotations, citations of published references, and formatting for citations and references.

As a handbook on grammar, the *APA Publication Manual* is not comprehensive but does an excellent job of covering precisely those points that seem to give students the most trouble. Some of these grammatical rules are largely universal today. Other rules take a position where several forms are acceptable among grammarians. Certain grammatical errors have become so commonplace that they are sometimes accepted as correct. However, the formality of a dissertation calls for strictly correct usage.

Students should also note that respect for diversity includes consideration of bias in language. The *APA Publication Manual* provides guidelines for reducing such bias. Specific examples are given to help guide revisions of text. Recommendations for reducing bias in language address gender, sexual orientation, racial and ethnic identity, physical challenges, and age.

The student's dissertation committee, and especially the chair, is responsible for monitoring compliance with the APA format. The committee can assist the student with writing issues such as clarity and organization, in addition to providing guidance about content. However, students should bear in mind that they are solely responsible for the finished product, which must be original work.

Dissertation Proposal Defense Scheduling Form

The formal defense of the dissertation proposal is designed to ensure that the student has a workable plan that meets the standards of scholarship appropriate to earning a doctoral degree. The defense also allows the dissertation committee to reach clear agreement about the structure and scope of the proposed project.

The student should make sure that all dissertation committee members are given sufficient time to read and reflect upon the proposal prior to the defense (<u>two weeks</u> is recommended). This form should be completed to verify that the proposal document has been received in a timely manner and the defense has been scheduled. <u>Faculty members' signatures indicate that they agree to serve on the dissertation committee and grant their approval to schedule the defense.</u>

Please submit this form to the Program Specialist once all signatures have been obtained.

Student Name:

Proposed Dissertation Title:

Proposal Defense Date, Time, and Place:

Committee Chair Name (please print):

Signature

Second Committee Member Name (please print):

Signature

Third Committee Member (optional) Name (please print):

Signature

Student

Signature

Date

Date

Date

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Oral Defense of the Dissertation Proposal

The dissertation chair and committee members will sign this form after the proposal defense has been passed. The student should bring this form to the defense meeting, obtain signatures from committee members, and then submit it and a copy of the approved proposal to the Program Specialist.

Student Name:

Proposed Dissertation Title:

Signatures indicate that the student has <u>passed the oral defense of the dissertation proposal</u>. Any remaining revisions to the proposal document that are required by the committee will be overseen and approved by the dissertation chair.

Committee Chair Name (please print):

Signature

Second Committee Member Name (please print):

Signature

Third Committee Member (optional) Name (please print):

Signature

Student

Signature

Date

Date

Date

Dissertation Defense Scheduling Form

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Signature

Second Committee Member Name (please print):

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Student

Signature

Date

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Date

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Oral Defense of the Dissertation

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Third Committee Member (optional) Name (please print):

Signature

Student

Signature

Date

Date

Date